



ARIZONA DEPARTMENT OF TRANSPORTATION

HIGHWAYS DIVISION

206 South Seventeenth Avenue Phoenix, Arizona 85007

P. MOFFORD
Governor

CHARLES L. MILLER
Director

GARY K. ROBINSON
Acting State Engineer

August 5, 1987

title first last jrsr
position
company
address
city, state zip

Dear title last :

The purpose of this letter is to request that Reservations forward copies of their accident reports to the ADOT, as do all other law enforcement agencies Statewide. The purpose of the attached copy of an accident report will be explained in more detail later in this letter.

A representative of the Federal Highway Administration, two members of my staff, and I met in May with members of the U.S. Public Health Service and various representatives of member tribes of the Inter-Tribal Council of Arizona. We were invited to speak to the Council about the importance of and the potential benefits that could be derived from the Tribes' reporting their accidents directly to ADOT. [Now, we at ADOT recognize that, as sovereign governments, Reservations are not bound to the State law which requires other incorporated jurisdictions to report their accidents to ADOT.] After a good discussion, the consensus opinion seemed to be that Reservations would benefit from voluntarily sending in copies of the reports because this information would be used to determine where safety improvements are needed on State highways within Reservation boundaries.

There was also a general agreement that tribes were reluctant to report all accidents to ADOT because of questions regarding the personal information entered on the accident report and how it is used and treated. Let me assure you that ADOT is not interested in personal information, nor does the information get reported to any law enforcement agencies, Federal, State, or local. We are interested only in engineering information- information that deals with the roadway and environmental circumstances which may have contributed to the accidents. We never use drivers' or passengers' names, their addresses, or any other information which could be used to identify a person, such as vehicle identification number or driver's license number.



Attached is a copy of a report that has been "sanitized," that is, all personal identifying information has been blackened out using a broad felt tip marker. This report provides all of the engineering information we need without compromising the identification of the parties involved. Note that personal information has been stripped from the narrative and that involved parties and vehicles are referred to as Driver 1, Vehicle 2, etc.

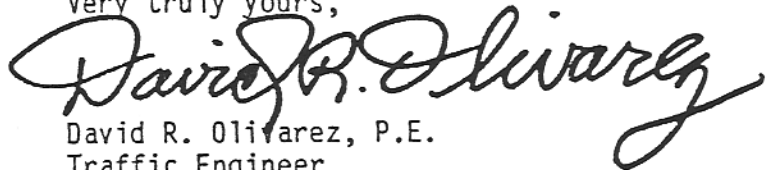
Except for fatal accidents, for which all information is entered into the Federal (not State) Fatal Accident Reporting System data base, it would be completely acceptable to ADOT to submit all of your reports in this form if you wish. The important thing to know is that we need to have copies of your reports and that your future cooperation in forwarding them to us periodically will benefit the Native American population on your Reservation.

We generally keep three full years of accident data on file, so if you have the capability of preparing copies of reports to as far back as January 1, 1985, please do so. Forward these and copies of future accident reports to the following address:

Arizona Department of Transportation
Traffic Records Unit
1739 West Jackson Street
Mail Drop 105T
Phoenix, Arizona 85007-3276

Thank you for your prompt attention to this matter. If you have any questions, please contact Joe Spadafino at (602) 255-8875.

Very truly yours,



David R. Olivarez, P.E.
Traffic Engineer
Traffic Design Services

DRO:jfs

c: Jack L. Christy

ARIZONA TRAFFIC ACCIDENT REPORT FORWARD COPY TO ARIZONA DEPARTMENT OF TRANSPORTATION ACCIDENT RECORDS ANALYSIS UNIT 222E 205 S. 17TH AVE., PHOENIX, ARIZONA 85007			DATE YEAR MONTH DAY 8 7 0 6 0 8 0 1 3 8			HOUR 12			AGENCY USE			AGENCY REPORT NUMBER AUG 14 1987 1-87-07955		
INJURY 1 NO INJURY 2 POSSIBLE INJURY 3 NON-INCAPACITATING 4 INCAPACITATING 5 FATAL 6 UNKNOWN			REPORT ID 018903139201			OFFICER'S ID NO. 12			DAY OF WEEK 2			TOTAL NO. OF SHEETS THREE		
TOTAL INJURIES 01			TOTAL FATALITIES 00			ESTIMATED TOTAL DAMAGE OVER MINIMUM 12			FATAL HIT/RUN GOVT. PRO. 12			DISTRICT OR GRID NO. 0111010		
LOCATION NAME OF STREET OR HIGHWAY ON U.S. HIGHWAY 8087			CITY WINSLOW 62			COUNTY NAVASO 09			DISTANCE MILES 0.100					
INTERSECTING STREET, ROAD, R.P. OR R.P. AT M367.5			<input type="checkbox"/> NORTH <input checked="" type="checkbox"/> EAST			<input type="checkbox"/> SOUTH <input checked="" type="checkbox"/> WEST			<input type="checkbox"/> PLUS <input checked="" type="checkbox"/> MINUS					
TRAFFIC UNIT NO. 1 STATE CLASS LICENSE OR SOCIAL SECURITY NO. AZ 2 [REDACTED]			DRIVER <input type="checkbox"/> PEDESTRIAN <input checked="" type="checkbox"/> PEDALCYCLIST			NAME D-1			SEX MA			INJ 2		
RESTRICTIONS UNKNOWN			DATE OF BIRTH [REDACTED]			ADDRESS [REDACTED]			CITY ARIZONA			STATE AZ		
PLATE NUMBER [REDACTED]			STATE AZ			OWNER'S NAME [REDACTED]			ADDRESS [REDACTED]			STATE AZ		
COLOR YEAR MAKE BODY STYLE BLUE 78 FORD 1/2 TON PICKUP			CAMPER VIN [REDACTED]			RESTRAINT USED YES			YES NO			UNK		
REMOVED TO [REDACTED]			REMOVED BY WRECKER			ORDERS OF OFFICER			POSTED SPEED LIMIT 55			OFC EST SPEED 73		
TRAILER (OTHER UNIT) PLATE NO. STATE YEAR NONE			DESCRIPTION OF TRAILER OR OTHER UNIT			OFC EST REAS 55			OFC EST REAS 55			OFC EST SPEED 73		
TRAFFIC UNIT NO. 2 STATE CLASS LICENSE OR SOCIAL SECURITY NO. [REDACTED]			DRIVER <input type="checkbox"/> PEDESTRIAN <input checked="" type="checkbox"/> PEDALCYCLIST			NAME			SEX			INJ		
RESTRICTIONS			DATE OF BIRTH			ADDRESS			CITY			STATE		
PLATE NUMBER			STATE YEAR			OWNER'S NAME			ADDRESS			CITY STATE		
COLOR YEAR MAKE BODY STYLE			CAMPER VIN			RESTRAINT USED YES			YES NO			UNK		
REMOVED TO			REMOVED BY			ORDERS OF			POSTED SPEED LIMIT			OFC EST SPEED		
TRAILER (OTHER UNIT) PLATE NO. STATE YEAR			DESCRIPTION OF TRAILER OR OTHER UNIT			OFC EST REAS			OFC EST REAS			OFC EST SPEED		
ATTENDING POSITION DIAGRAM 10 NOT IN PASSENGER COMPART. 07 01 08 05 09 06 10 03 11 MOTORCYCLE 12 OTHER 13 UNKNOWN 14 PEDALCYCLE			RU- Y-YES RESTRAINT N-NO USED UN-UNK			HU- Y-YES HELMET N-NO USAGE UN-UNK			INJURED TAKEN TO/ BY [REDACTED]					
PASSENGERS UNIT SEAT POS RU NAME ADDRESS CITY STATE HU AGE SEX INJ			1 1 1 [REDACTED] [REDACTED] [REDACTED] [REDACTED] 27 M 2			2 2 2 [REDACTED] [REDACTED] [REDACTED] [REDACTED] 30 R 2			3 3 3 [REDACTED] [REDACTED] [REDACTED] [REDACTED] 23 R 1			4 4 4 [REDACTED] [REDACTED] [REDACTED] [REDACTED] 33 M 1		
OTHER PROPERTY DAMAGE (DESCRIBE) NONE			OWNER'S NAME			ADDRESS			CITY			STATE TELEPHONE NUMBER		
WITNESSES NAME ADDRESS CITY STATE TELEPHONE NUMBER AGE			NONE			JAN 1988								
NAME A.R.S. NO. OR CITY CODE CITATION/ARREST NUMBER(S)														
PHOTOS TAKEN <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			PHOTOGRAPHER'S NAME, ID NUMBER, AND AGENCY			INVEST AT SCENE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			DATE INVEST. 06-08-87			TIME INVEST. 0138		
OFFICER'S SIGNATURE AND ID NUMBER [Signature] #3139			AGENCY NDPS WINSLOW, AZ			DATE COMPLETED 6-20-87								

10-DIAGRAM <div style="height: 200px; border: 1px solid black; position: relative;"> </div>		11-INDICATE NORTH <div style="border: 1px solid black; height: 50px; width: 100%;"></div>	12-SKIDDING OCCURRED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO 01 13-ACCIDENT MEASUREMENTS <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> SEE SUPPLEMENTALS </div>
14-DESCRIBE WHAT HAPPENED <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> SEE SUPPLEMENTALS </div>		15-CLASSIFICATION BY TYPE YES NO <input checked="" type="checkbox"/> RAN OFF ROADWAY PRIOR TO FIRST HARMFUL EVENT COLLISION BETWEEN A MOTOR VEHICLE IN TRANSPORT AND 1 PEDESTRIAN 2 MOTOR VEHICLE 3 RAILWAY TRAIN 4 PEDALCYCLIST 5 ANIMAL 6 FIXED OBJECT 7 OTHER OBJECT <u>HILLCREST</u> NONCOLLISION INVOLVING A MOTOR VEHICLE IN TRANSPORT 8 OVERTURNING 9 OTHER NONCOLLISION	
16-LIGHT CONDITION CHECK ONLY ONE 1 DAYLIGHT 2 DAWN OR DUSK 3 DARKNESS YES NO 1 STREET LIGHT 2 STREET LIGHT FUNCTIONING	21-SPECIAL LOCATION CHECK ONLY ONE 1 SCHOOL CROSSING 2 PEDESTRIAN CROSSWALK (STRIPED) 3 PEDESTRIAN CROSSWALK (NO STRIPING) 4 BRIDGE 5 TUNNEL 6 RR CROSSING 7 ALLEY 8 BIKE PATH 9 2-WAY LEFT TURN LANE	24-NON-INTERSECTION ROAD CHARACTER CHECK ONLY ONE 1 2-WAY STRIPED CENTERLINE 2 2-WAY, NO STRIPE 3 2-WAY, PAINTED MEDIAN 4 2-WAY, RAISED MEDIAN 5 2-WAY, BARRIER MEDIAN 6 2-WAY, DEPRESSED MEDIAN 7 2-WAY, EXTENDED MEDIAN 8 1-WAY STREET	25-VIOLATIONS BEHAVIOR TWO CHOICES PER PERSON MAY BE SELECTED 1 NO IMPROPER DRIVING 2 SPEED TOO FAST FOR CONDITIONS 3 EXCEEDED LAWFUL SPEED 4 FAILED TO YIELD RIGHT-OF-WAY 5 FOLLOWED TOO CLOSELY 6 RAN STOP SIGN 7 DISREGARDED TRAFFIC SIGNAL 8 MADE IMPROPER TURN 9 DROVE IN OPPOSING TRAFFIC LANE 10 KNOWINGLY OPERATED WITH FAULTY OR MISSING EQUIPMENT 11 REQUIRED MOTORCYCLE SAFETY EQUIPMENT NOT USED 12 PASSED IN NO PASSING ZONE 13 UNSAFE LANE CHANGE 14 OTHER UNSAFE PASSING 15 INATTENTION 16 DID NOT USE CROSSWALK 17 WALKED ON WRONG SIDE OF ROAD 18 OTHER 19 UNKNOWN
17-WEATHER CONDITIONS CHECK ONLY ONE 1 CLEAR 2 RAINING 3 CLOUDY 4 SNOWING 5 STRONG WIND 6 DUST 7 FOG	22-UNUSUAL ROAD CONDITION CHECK ONLY ONE 1 UNDER CONSTRUCTION, TRAFFIC ALLOWED 2 UNDER CONSTRUCTION, NO TRAFFIC ALLOWED 3 UNDER REPAIRS 4 HOLES, RUTS, BUMPS 5 OBSTRUCTION-PROTECTED 6 OBSTRUCTION-UNPROTECTED 7 OBSTRUCTION-UNLIGHTED AT NIGHT 8 DEFECTIVE SHOULDER 9 CHANGING ROAD WIDTH 10 FLOODED 11 TEMPORARY LANE CLOSURE	25-ROAD GRADE CHECK ONLY ONE 1 LEVEL 2 DOWNGRADE 3 UPGRADE 4 HILLCREST 5 DIP	26-UNUSUAL ROAD SURFACE CONDITION CHECK ONLY ONE 1 WET 2 LOOSE SAND, DIRT OR GRAVEL 3 SNOW/ICY 4 FRESH OIL 5 OTHER 6 UNKNOWN
18-ROAD SURFACE TYPE CHECK ONLY ONE 1 ASPHALT 2 CONCRETE 3 GRAVEL 4 DIRT 5 OTHER	23-TRAFFIC CONTROL DEVICES LEGEND: A-DEVICE PRESENT B-DAMAGED OR NON-FUNCTIONAL PRIOR TO ACCIDENT CHECK ANY THAT APPLY 1 A B STOP AND GO SIGNAL 2 YIELD SIGN 3 STOP SIGN 4 WARNING SIGN 5 RAILROAD SIGNAL 6 FLASHING SIGNAL 7 FLAGMAN OR OFFICER	27-PHYSICAL CONDITION TWO CHOICES PER PERSON MAY BE SELECTED 1 NO APPARENT DEFECTS 2 HAD BEEN DRINKING 3 APPEARED TO BE UNDER INFLUENCE OF DRUGS 4 ILL-ABILITY INFLUENCED 5 SLEEPY-FATIGUED 6 OTHER BODILY DEFECTS, INFIRMITIES 7 UNKNOWN	28-VEHICLE CONDITION TWO CHOICES PER VEHICLE MAY BE SELECTED 1 NO APPARENT DEFECTS 2 DEFECTIVE BRAKES 3 DEFECTIVE STEERING 4 DEFECTIVE HEADLIGHTS 5 DEFECTIVE TAIL LIGHTS 6 DEFECTIVE TURN-SIGNAL 7 PUNCTURE OR BLOWOUT 8 ONE OR MORE SMOOTH TIRES 9 FIRE 10 DEFECTIVE WINDSHIELD WIPER 11 DEFECTIVE EXHAUST SYSTEM 12 OTHER DEFECTS 13 NO TRAILER BRAKES 14 UNKNOWN
19-TYPE OF LOCATION CHECK ONLY ONE 1 INTERSECTION 2 JUNCTION AREA 3 NON-JUNCTION AREA 4 DRIVEWAY ACCESS 5 ALLEY ACCESS INTERSECTION RELATED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		30-TRAFFIC UNIT ACTION CHECK ONE PER UNIT 1 GOING STRAIGHT AHEAD 2 SLOWING IN TRAFFICWAY 3 STOPPED IN TRAFFICWAY 4 MAKING LEFT TURN 5 MAKING RIGHT TURN 6 MAKING U TURN 7 ENTERING ALLEY OR DRIVEWAY 8 LEAVING ALLEY OR DRIVEWAY 9 OVERTAKING/PASSING 10 CHANGING LANES 11 BACKING 12 AVOIDING VEHICLE, OBJECT, PEDESTRIAN 13 ENTERING PARKING POSITION 14 LEAVING PARKING POSITION 15 PROPERLY PARKED 16 IMPROPERLY PARKED 17 DRIVERLESS MOVING VEHICLE 18 CROSSING ROAD 19 WALKING WITH TRAFFIC 20 WALKING AGAINST TRAFFIC 21 STANDING 22 LYING 23 GETTING ON/OFF VEHICLE 24 WORKING ON OR PUSHING VEHICLE 25 WORKING ON ROAD 26 OTHER 27 UNKNOWN	
31-VISION OBSTRUCTIONS CHECK ONE PER UNIT 1 NOT OBSCURED 2 BY PARKED STOPPED VEHICLE 3 BY MOVING VEHICLE 4 BY BUILDING 5 BY EMBANKMENT 6 BY SIGNBOARD 7 BY HILLCREST 8 BY LOAD ON VEHICLE 9 BY TREES, BUSHES 10 BY HEADLIGHT 11 BY SUN GLARE 12 BECAUSE OF BAD WEATHER 13 OTHER 14 RAIN, SNOW, FOG ON WINDSHIELD 15 WINDSHIELD OBSCURED-OTHER 16 UNKNOWN		32-MOTORCYCLE HELMET USED CHECK ONE PER UNIT 1 YES 2 NO UNKNOWN	

THIS IS A ONE VEHICLE ACCIDENT WITH INJURY THAT OCCURRED U.S. HIGHWAY 87 AT MILEPOST 367.5. THIS ROAD IS EXTENDING THE NORTH AND SOUTH DIRECTION. THE ACCIDENT OCCURRED ON THE SOUTH BOUND LANE.

ON MONDAY, 08 JUN 1987 AT 0109 HOURS, I WAS NOTIFIED BY WINSLOW ROCK RADIO DISPATCHER ON TELEPHONE REGARDING THIS ACCIDENT. I WAS ALSO TOLD THAT AN AMBULANCE WAS ENROUTE FROM WINSLOW.

ON MY ARRIVAL AT THE SCENE AT 0138 HOURS, I NOTICED A BLUE 1/2 TON PICK UP TRUCK. BEARING ARIZONA LICENSE # [REDACTED]^{Y-1}. THIS VEHICLE HAD LANDED ON ITS CAB, FACING WEST DIRECTION.

THERE WERE MOTORIST AT THE SCENE ASSISTING THE VICTIMS (TWO) WHO WERE EJECTED FROM THE VEHICLE.

THE DRIVER OF THE VEHICLE, [REDACTED]^{D-1} WAS EJECTED FROM THE VEHICLE DURING THE COURSE OF THE ACCIDENT.

IN BEING QUESTIONED BY OFFICER, I SMELL A MILD ODOR OF INDICATING LIQUOR ON HIS BREATH. HE RECEIVED MINOR ABRASIONS ON THE FACIAL AREA AND A LACERATION ABOUT 1/2" ON HIS LEFT ANKLE. WHILE MR. [REDACTED]^{D-1} WAS BEING QUESTIONED. THE AMBULANCE ARRIVED AND IMMEDIATELY FIRST AID WAS APPLIED.

P-1 [REDACTED] WHO WAS SITTING BY THE DRIVER WAS ALSO EJECTED FROM THE VEHICLE. THERE WAS NO VISIBLE BRUISES OR INJURY ON [REDACTED]^{P-2}, ONLY THAT SHE COMPLAINED OF CHEST AND BACK PAIN. SHE WAS ALSO COMPLAINING OF HER LEFT HIP WHICH AT THE TIME COULD NOT MOVE.

THERE WERE TWO OTHER PASSENGERS, [REDACTED]^{P-2} AND [REDACTED]^{P-3} WHO RECEIVED NO VISIBLE INJURY.

THE [REDACTED] AMBULANCE TRANSPORTED ALL VICTIMS TO [REDACTED] HOSPITAL FOR MEDICAL TREATMENT.

THE ACCIDENT AT THE SCENE THAT THE VEHICLE WAS PRO-

INVESTIGATOR'S SIGNATURE

Dorene Jackson

DATE
08 JUN 87

CEEDING SOUTHBOUND WHEN THE VEHICLE CAME OFF THE SHOULDER
THE ROADWAY AND OVER CORRECTED AND THE VEHICLE LEFT
3 CENTER STRIPED LANE WHERE THEN THE VEHICLE STARTED
TO SKID CAUSING TO BROADSIDE OFF THE LEFT SHOULDER
OF THE ROADWAY AND PROCEEDED UP HILL WHICH IS 17 FOOT
IN HEIGHT. THE VEHICLE PROCEEDED ALONG THE MIDSECTION
OF THE HILL WHILE STILL GOING STRIGHT UP UNTIL THE VEHICLE
IMPACTED WITH A SMALL DITCH DOWNHILL CAUSING THE VEHICLE
TO OVER TURN AND AIRBORNE LANDING ON THE TIP OF THE
HILL WITH THE CAB OF VEHICLE ON GROUND.

THE SPEED OF THE VEHICLE WAS ESTIMATED TO BE
PROCEEDING AT 73 MILES PER HOUR WHEN THE VEHICLE
LOST CONTROL.

THE DAMAGE WAS ESTIMATED TO BE A TOTAL LOSS
DUE TO HEAVY DAMAGE UNDER THE VEHICLE, AXLE
END, RIGHT SIDE FENDER AND DOOR BEND AND PASSENGER
SIDE WINDOW BROKEN. THE LEFT SIDE OF THE TRIMMING
AROUND THE DOOR HAD A DENT AND BROKEN DRIVER SIDE
WINDOW. THE CAB OF THE VEHICLE WAS BEND INWARDS.

THIS REPORT IS FOR INSURANCE PURPOSE.

SIGNATOR'S SIGNATURE

Dulene Jackson

DATE
20 JUN 87

TRAFFIC ACCIDENT
INTERPRETIVE CODING FORM

† 01-0401 R11/85

FORWARD COPY TO
ARIZONA DEPARTMENT OF TRANSPORTATION
SAFETY PROJECTS SERVICES BUREAU
17TH AVE., PHOENIX, ARIZONA. 85007

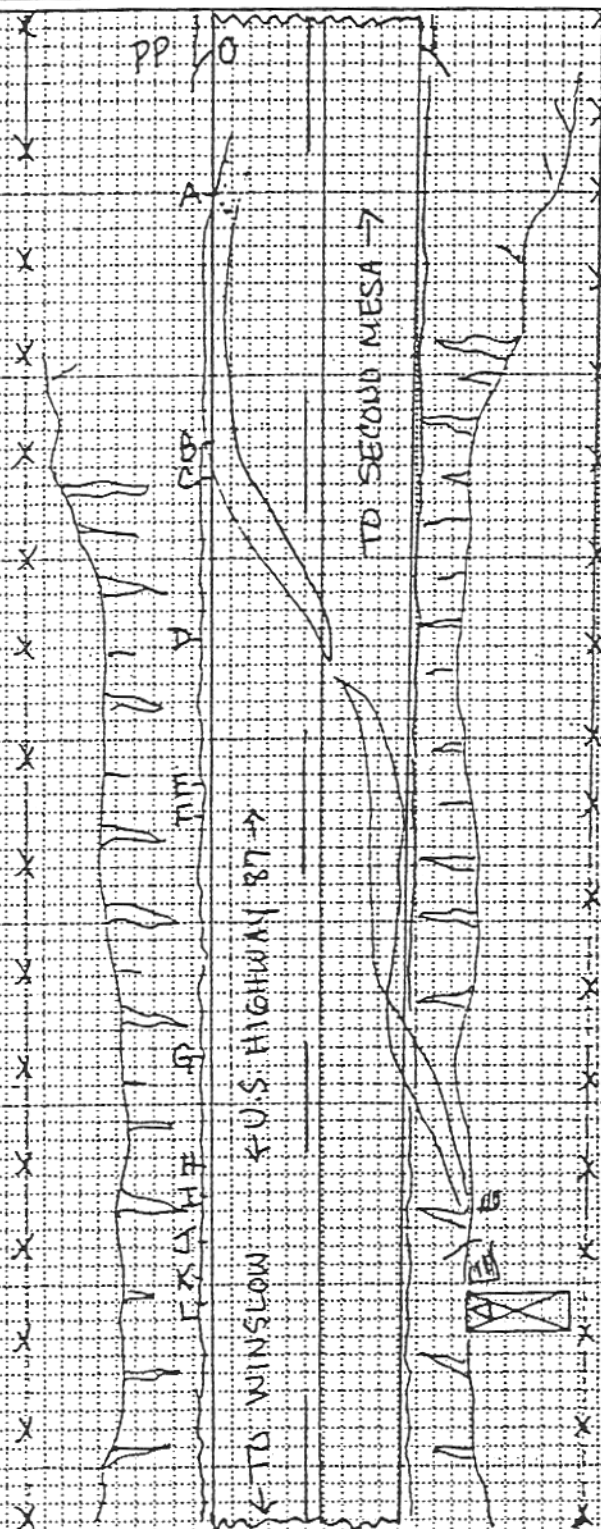
NAME	[REDACTED]									
DATE	[REDACTED]									
TIME	[REDACTED]									
LOCATION	[REDACTED]									
REMARKS	[REDACTED]									

AGENCY USE

1-87-9755

ACCIDENT DIAGRAM

☒ MEASUREMENTS ARE APPROXIMATE AND NOT TO SCALE
☐ MEASUREMENTS ARE SCALED (SCALE = _____)



INDICATE
NORTH



ARIZONA TRAFFIC ACCIDENT REPORT

FORWARD COPY TO
ARIZONA DEPARTMENT OF TRANSPORTATION
SAFETY PROJECTS SERVICES III
2, 17TH AVE., PHOENIX, ARIZONA, 85007

SUPPLEMENT

YEAR	MONTH	DAY	HOUR	MIN	SEC
87	06	08	01	38	
OFFICER'S NO.	OFFICER'S ID NO.	OFFICER'S SIGNATURE			
4189	031392				

AGENCY REPORT NUMBER

1-87-9755

☒ MEASUREMENTS ARE APPROXIMATE AND NOT TO SCALE
☐ MEASUREMENTS ARE SCALED ISCALE 2

ACCIDENT DIAGRAM

INDICATE
NORTH

POINT	E	DESCRIPTION
PP 246"	○	CULVERT
A 15193"	○	RIGHT FRONT TIRE LEAVING ROADWAY
B 116596"	○	REAR RIGHT TIRE COMING BACK ON ROADWAY
C 167997"	○	RIGHT FRONT TIRE COMING BACK ON ROADWAY
D 17500"	○	VEHICLE WENT OUT OF CONTROL - ROTATING
E 19065"	○	LEFT FRONT TIRE ON EDGE OF ROADWAY
F 19440"	○	RIGHT FRONT TIRE LEAVING ROADWAY
G 191640"	○	REAR LEFT TIRE LEAVING ROADWAY
H 19960"	220"	VEHICLE PROCEEDED UPHILL
I 20600"	410"	VEHICLE CAUSED TO AIRBORNE
J 20640"	440"	VEHICLE OVERTURNED AT SMALL DITCH
K 20750"	376"	VEHICLES RESTING POINT - LEFT FRONT TIRE
L 20500"	378"	VEHICLES RESTING POINT - RIGHT FRONT TIRE
WIDTH OF ROADWAY - 26'0"		